MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 6

																			•									
ije (_{የባን}	ar	page	a mi	net	he	co	mn	let	ed i	hv	tha	ro	nΩi	rt r	TOT	a ra	æ		;	SPD					· -		
			ts re					_			-			PΟ	ı v ţ	n Ç	ai (JI •			N	Y	R	2	0	A	2	9
100	ose	01	ıe:																									
Tì	his	re	por	t is	b	ein	gs	sub	m	itte	ed	ОĽ	be	ha	lf	of :	an	in	liv	idı	ıal	M	S4	•				
Fi	ill i	n S	PDI	ES I	D i	n u	ppe	er r	igh	t ha	ınd	co	rne	r.														
	-		MS4			_				<u>Γ</u>			I	1	Ι,		1				-		Т		$\overline{}$			1
I	. c) W	n	ا با	0	f		H	u	n	E	1	n	g	t	0	n											
T	his	re	por	t is	b	ein	g s	suk	m	itte	ed	on	be	eha	lf	of	a S	inį	gle	E	ntit	t y						
(F	Per	Pa	- t II.	E of	f Gl	P-0	-10)-00	02)										_									
Na	ame	of	Singl	e En	tity				,		_											_	— т	г				
															<u> </u>	<u> </u>										ı		
										•																		
TI	his	is	a jo	ainí	t re	enc	ort	he	in	σs	nh	m	itte	h	Λ'n	he	hal	f o	of s	ı ce	nal	itic	m.					
			SPI			-				_														re 2	if	nee	dec	i.
			Coali				. •		P	*****		* -1.							r		• –		Ις	,				
Ţ		Ť																										
F		T									<u> </u>				T												Ì	
F			<u>. L</u>	<u> </u>				<u> </u>	<u> </u>	 	<u> </u>	1 T	$\frac{1}{1}$	<u> </u>	 	+	<u> </u>			L		==				극		
L		i_	-l			L	<u>. </u>	<u> </u>	ļ	<u> </u>	<u></u>	Į.			1					ļ								
	PDE		$\neg \neg$	1_	Γ_								1	<u> </u>	_													
	M I Y					•	Ţ	T	1		\neg	ES	Т			7										7		
C) T	Ь	7]		0	Α]		N	Y	R	2	0	A					N	Y	R	L.,	0	A		
	PDI	SI	D	·	I]	S	N SPC	Y ES	R ID								N SPI	Y	R ID		L <u> </u>			
N	PDI	ES I	2	·	I					S	N SPC N	Y ES Y	R ID R	2	0						N SPI N	Y DES Y	R ID R	2	L <u> </u>	A		
SI	PDI	ES I	D 2	0	A					S	N SPC N	Y ES	R ID R ID								N SPI N	Y DES Y	R ID	2	L <u> </u>	Α		
SI N	PDI	ES I	D 2 D 2 2	0	I					S	N SPL N	Y ES Y DES	R ID R ID R	2	0	A					N SPI N SPI N	Y DES DES	R ID R	2	0	Α		
SI SI	PDI	ES I	D 2 D 2 2	0	A						N SPE N SPE	Y ES Y ES	R ID R ID ID	2	0	A					N SPI N SPI N	Y DES DES DES	R ID R ID R	2	0	Α		
SI SI N	PDI	ES I ES I Y 1 ES I Y 1	D 2 2 D 2 D 2 2 2	0	A						N SPE N SPE	Y DES Y DES Y DES Y DES	R ID R ID R ID R ID R	2	0	A					SPI N SPI N SPI	Y DES Y DES Y OES	R R R ID R	2 2	0	A A		
	PDI PDI PDI	ES I Y 1 ES I Y 1 ES I Y 1	D 2 2 D 2 D 2 2 2	0 0	A						N SPE N SPE	Y DES Y DES Y Y Y	R ID R ID R ID R ID R	2	0	A					SPI N SPI N SPI N	У ОЕЗ У ОЕЗ У ОЕЗ	R R S ID R R S ID R	2 2 2	0	A		
	PDI PDI PDI	ES I I I I I I I I I I I I I	D 2 2 D 2 D 2 D 2 2 D 2 2 D 2 2 2 D 2 2 2 D 2 2 2 D 2 2 2 D 2 2 2 D 2 2 2 D 2	0 0	A						N SPE N SPE N SPE N	Y DES Y DES Y DES Y DES	R ID R ID R ID R ID R ID ID ID	2 2	0	A A					SPI N SPI N SPI N	Y DES Y DES Y DES Y DES	R S ID R S ID R S ID	2 2 2	0	A A		

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 6

Provide SPDES ID of each permitted MS4 included in this report.

SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A
SPDES ID	SPDES ID	SPDES ID
N Y R 2 0 A	N Y R 2 0 A	N Y R 2 0 A

MCC form for period ending March 9, 2 0 1 6

Name of MS4 Town of Huntington	SPDES ID N Y R 2 0 A A 2 9
Each MS4 must submit an MCC form.	
Section 1 - MCC Identification Page	
Indicate whether this MCC form is being submitted to certify endorsement	t or acceptance of:
● An Annual Report for a single MS4	
○ A Single Entity (Per Part II.E of GP-0-10-002)	
O A Joint Report	
Joint reports may be submitted by permittees with legally b	inding agreements.
If Joint Report, enter coalition name:	

MCC form for period ending March 9, 2 0 1 6
Name of MS4 Town of Huntington SPDES ID N Y R 2 0 A 2 9 7
Section 2 - Contact Information
Important Instructions - Please Read
 Contact information must be provided for <u>each</u> of the following positions as indicated below: Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
 Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form) The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).
A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.
If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.
For each contact, select all that apply:
● Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
O Local Stormwater Public Contact
O Stormwater Management Program (SWMP) Coordinator
○ Report Preparer
First Name MI Last Name
Frank PPetrone
Title
S u p e r v i s o r
Address
100 Main Street
City State Zip H u n t i n g t o n
eMail
fpetrone@huntingtonny.gov
Phone County

Suffolk

MCC form for period ending March 9, 2 0 1 6
SPDES ID Name of MS4 Town of Huntington N Y R 2 0 A 2 9 7
Section 2 - Contact Information
Important Instructions - Please Read
Contact information must be provided for <u>each</u> of the following positions as indicated below:
 Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c)
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).
A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.
If a new Duly Authorized Representative is signing this report, their contact information must be
provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.
For each contact, select all that apply:
O Principal Executive Officer/Chief Elected Official
O Duly Authorized Representative
O Local Stormwater Public Contact
Stormwater Management Program (SWMP) Coordinator
O Report Preparer
First Name MI Last Name
Edward A Carr
Title Stormwater Management Officer
Stormwater Management Officer Address
100 Main Street
City State Zip
H u n t i n g t o n N Y 1 1 7 4 3 -
eMail
ecarr@huntingtonny.gov
Phone County

Suffolk

3 5 1 - 3 2 2 8

MCC form for period ending March 9, 2 0 1

		211	DES	ш						
Name of MS4	Town of Huntington	N	Y	R	2	0	Α	2	9	7

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
- 3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name												МІ		Las	t Na	ıme										 	
R o b e	rt													L	i	t	z	k	е								
Title									_																	 	
E n v	Pr	0	g	r	a	m	S		С	0	0	r	d	i	n	a	t	0	r								
Address									-											,	_					 ,	
1 0 0	M a	i	n		s	t	r	е	е	t														<u> </u>		<u>.</u>	
City																S	tate		Zir)				1	_		
City H u n t	in	g	t	0	n											S		Y	Zip 1	1	7	4	3	_			
1 1	i n	g	t	0	n																7	4	3] -			
Hunt	i n	g	t @	o h	n u	n	t	i	n	g	t	0	n	n	У						7	4	3] -			
H u n t	·····		<u> </u>			n	t	i	n	g	t	0	n	n Cor	L		7 Z	Y	1		7	4	3]_			

MCC form for period ending March 9, 2 0 1 6

Name of MS	4 Town	of Hu	ntingt	on														Г	N	Y	R	2	0	Α	2	9	7
Section 3					ma	tio	<u>1</u>																				
oid your MS4 eriod?	work	with	part	tners	/coa	ılitio	n to	0 C	omį	olet	e so	me	e or	all	per	mit	req	uir	eme	ents	s du	ring		is re			g No
f Yes, comp	lete ir	ıforn	natio	on b	elov	V.																					
Submit a	separ	ate s	heet	for	eac	h pa	rtn	er.	Inf	orı	mat	ior	pr	ovi	dec	l in	oth	er	for	ma	ts v	vill	no	t be	;		
accepted.	If you	ır M	S4 o	coop	erat	ted v	vitl	h a	co	alit	ion	, SI	ıbn	iit (one	sh	eet	wi	th t	he	nar	ne (ot t	he			
coalition.	It is i	ot n	eces	sary	to	incli	ude :	a	sep	ara	ate :	she	et 1	or	eac	n IV	154	ł 111	. LII	e c	oan	HO	11.				
f No, procee	ea to s	secti	on 4	- U	ertii	ncat	101	1 5	tate	me	ent.																
artner/Coalitie	on Nam	e		·												, <u>-</u> -				_				т	г <u>-</u>		
					:						i																
artner/Coaliti	on Nan	ie (co	n't.)																SPI	DES	Pa	tne	r ID) - If	app	lica	bl <u>e</u>
									ļ										N	Y	R	2	0				
ddress		<u> </u>		<u> </u>											1		-	,									
ity		<u> </u>	i_	Ш	<u> </u>			1						L	S	tate		Zip	L	1		<u>. </u>			<u> </u>		
] -				
Mail							· · ·							_	1		_	· ··-			_	1	_				
														i						_	<u>l</u>						L.
hone)[11.1		-	alas	d		+1-	41a :		n eeten	A#	(a.	wi	th (GP-0	-08	-00	2 Pa	art l	V.G	i.?	(rdan O Y	es		No sks
What tasks/	respor	1S1D1	iitie	s are	sna	area	WI	.u.ı	uns	s pa	ar un		(c.§	3. IV	1141	.1.3	CITC	, 		Jer	4111	, O1	TV2	T	 -		
MM1 _			l. <u>-</u>		<u> </u>					<u> </u>		<u> </u>	ļ	<u> </u>	<u>.</u>		<u>L</u> _			<u></u>	Т.		J		<u></u>	<u>ا</u>	<u></u>
MM2												_													<u> </u>		
MM3																											
MM4				<u>I</u> .																					<u> </u>		
O MM5																											
⊃ MM 6																											
Additional	tacke/	recn	nnei	hiliti	iec																						
						tom	, D	o et	M	7747	anna.	ทอา	nt F	יומיי	rtic	pg r	ear	jir <i>e</i>	ad f	or	MS	4s	in i	imn	air	ed	
Waters waters!	<i>nea Ir</i> neds in	<i>npro</i> nclu	<i>vem</i> led i	ent i in G	oira P-0	.eg) -08-	002	esi 2 P	art	IX	ger		u 1	<i>i</i> u(-	411 V	, u 1	.01	_ T J, X.			·t			

MCC form for period ending March 9, 2 0 1 6

		SPI	ES	\mathbf{I}			_			
Name of MS4	Town of Huntington	N	Y	R	2	0	A	2	9	7

Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VI.J.

First Name	MI	Las	t Na	me											
Frank	Р	P	е	t	r	0	n'	е							
Title (Clearly print title of individual signing report)															
Supervisor												L			
Signature				-											
1 1 1 1 1 1 1 1												-			
Tull teture							Dat	e	1 -			٦.	_	т.	
James O Joseph							0	5	/	3	1	I	0	10	$ J \zeta$

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	11 50	ıvıııı.	ung i	.111.5	TOTIL	as p	Jai t	01 6	1 101	III I	ерс	л	шυ	CHa	U	n a	ÇUa	LILIV		SPD			LI))Iai			
Name of	`MS4/C	Coaliti	on To	wn o	f Hunti	ingtor	1													N	Y	R	2	0	A	2	9	7
								V	<u>Va</u> 1	er	Q	ua	lity	<u>T</u>	rei	<u>nds</u>	<u> </u>											
The inf	ormati	on in	this	sect	ion is	s bei	ing :	repo	orte	d (c	hec	k o	ne):															
● On b ○ On b]		of a co	oalitie	on			but	ed 1	to tl	his	rep	ort'	? [٠								
1. Ha reli On	ated t				_				_		_										_			easi	ure Ye:		•	No
If Yes,	choose	e one	of th	e fo	llowi	ing																						
○ Repo	rt(s) a	ttache	d to	the	annu	al re	por	ŧ																				
○ Web		s) who		-			-					vhe	re r	epo	ort(s) c	an	be .	acc	ess	ed	- ne	ot h	ıom	e p	age	;.	
	URL												—т											—-т				
																				!								
	URL				ı		T .		····					•		<u>-</u>		- 1					-		т	Т		_
							<u> </u>																			_		ᆜ
	URL	-	1 7			1	Т		·													_	Į.	<u> </u>		\neg		
							<u> </u>	<u> </u>														- 1	<u></u> _	<u> </u>				
							<u></u>																<u> </u>					
					j																							
	URL							_	1														Γ					
						<u> </u>								_				_						<u> </u>				
							<u> </u>	<u> </u>															ļ. <u> </u>					<u> </u>
																									L			

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 & 1 & 6 \end{vmatrix}$

Name of MS4/Coalition Town of Huntington	SPDES ID N Y R 2 0 A 2 9 7
Minimum Control Measure 1. Public Ed	ucation and Outreach
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1. Targeted Public Education and Outreach Best Managem	ent Practices
Check all topics that were included in Education and Outreach of	luring this reporting period:
 Construction Sites 	Pesticide and Fertilizer Application
● General Stormwater Management Information	Pet Waste Management
Household Hazardous Waste Disposal	Recycling
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration
O Infrastructure Maintenance	■ Trash Management
○ Smart Growth	• Vehicle Washing
Storm Drain Marking	O Water Conservation
\bullet Green Infrastructure/Better Site Design/Low Impact Development	Wetland Protection
Other:	O None
Other	
2. Specific audiences targeted during this reporting period:	
● Public Employees ● Contractors	
● Residential • Developers	
○ Businesses	
O Restaurants O Industries	
Other: O Agricultural Other	

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

																						S	PD!	ES I	D						
Name	of M	S4/	Coal	itio	n To	own c	of Hu	intin	gton													1	N .	Y	R	2	0	A	2	9	7
3. V						lid ; riod									to	ac	hie	ve (edu	cat	tion	an	d c	out	rea	ch	goa	als	du	rin	g
O Con	nstru	ıcti	on S	ite	Ор	erat	ors	Tra	aine	d													#	Tra	iine	d [
O Dir	ect	Ma	iling	ξS									,										#1	Mai	ling	s [
• Kio	sks	or	Othe	er I	Disp	lays	S																# L	oca	tion	ıs					6
O Lis	t-Se	rve	5																					# In	ı Lis	st					
O Ma	iling	g Li	st																					# In	Lis	st					
○ Ne	wsp	ape	Ad	ls o	r A	rtic	les																# D	ays	Ru	n [
Pul	blic	Ev	ents	/Pre	eser	ntati	ons																# A	tter	ndee	s			4	2	0
O Sci	nool	Pro	ogra	m																			# A	tter	ıdee	es					
• TV	Spe	ot/P	rog	ram	l																		# I	ays	Ru	n				6	0
• Pri																					То	tal #	‡ Di	stril	bute	ed [
	Loca	tion	s (e.	g. li	brar	ies, t	towr	ı offi	ices,	kios	sks)	Т		- 1																	
	H	u	n	t	i	n	a	t	0 1	n	_ +		+	W	n	_	H		1	1											
	H	u	n	t		n	a	t	0 3	n	+	-+	+	b	r	a	r	i	e	s											
	N	0	r	t	h	р	이	r	t	<u> </u>	L	i	b	r	a	r	i	e	S										•		
O Oti	hor			_																											
O 01	IICi .						Т		\top	\neg		П																			
■ W				Des		le sp			1						hor			. (L	l	ı	n ne	vt t	กรณ	e if	'ada	litiz	mal	l en	ace	ie
• W		age			edec	-	jeci	inc	wet	au	iure	SSE	S - 1	ioi	1101	ne i	age	, .	JU11	LIIIL	ie oi	II IIC		pag	V 11	auc	11111	JIICU	ı əp	acc	10
) l		t	p	:	1	1	w	w	w	•	h	u	n	t	i	n	g	t	0	n	n	У		g	0	v	/	C	0	n	t
(e n	t	7	1	3	4	7	9	7	1	6	4	3	9	/	1	6	5	7	7	/	d	е	f	a	u	1	t		a	s
I						T	ļ																								
ι τπ				.1			-																								
U)	ı t	t	р	:	1	/	w	w	W		h	u	n	t	i	n	g	t	0	n	n	У		g	0	v	/	N	Н	W	Q
	P C	:				T	Ī				<u> </u>																				
-	1			ĺ	Ī	Ť	Ī	T						_																	_

This report is being submitted for the reporting period ending March 9, 2 0 1 6

																					_			SPL	ES	ID						
Naı	ne c	fΜ	S4/	Coa	litic	n	`own	of H	luntii	ngtor	1													N	Y	R	2	0	A	2	9	7
	W URL		Pag	ge c	on'	ˈt.:		Pre	ovi	de s	pec	eifi	c w	eb	add	lres	ses	- n	ot l	hon	ne j	pag	e.									
	h	t	t	р	:	/	/	W	W	W		h	u	n	t	i	n	g	t	0	n	n	У		g	0	v	/	С	r	a	b
	•	m	е	a	đ	0	w	-	w	a	t	е	r	ន	h	е	d															
	URL				r	·		1										r	r	r		1										
	h	t	t	р	:	/	/	W	W	W	٠	0	У	s	t	е	r	b	a	У	С	0	1	d	s	р	r	i	n	g	h	a
	r	b	0	r		0	r	g	/																							
						-																				i						
	URL		i		T	<u> </u>					<u> </u>		γ					Г		Γ			<u> </u>									
	_		<u> </u>		<u> </u>		<u> </u>				l	<u> </u>	<u> </u>	<u> </u>		<u> </u>	 			<u></u>						<u> </u>						
				 	ļ		<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u></u>	<u> </u>	<u> </u>				<u> </u>					<u> </u>				 		<u> </u>			
		L						1	<u> </u>				1	L		<u> </u>		·	i		l	L					J		<u> </u>	<u> </u>	L	
	URL	,										<u> </u>		· · ·		Ï				Γ						<u> </u>						
			<u> </u>		<u> </u>		<u> </u>							1			<u> </u>	<u> </u>						<u> </u>		!		<u> </u>	\ <u></u>			
		l <u></u>						<u> </u>	<u> </u>							<u> </u>	<u>. </u>				<u> </u>	!	 			<u> </u>						
	URI	J					1	1			I			I		I					I			L		L		<u>.</u>				
	URI	<u>.</u>	I		T	1	_	1		т		T	1			T		1	_	_	T	1	1	1	1	1	T	Ι	· · · ·		Τ	Τ-
		<u> </u>		<u> </u>	<u> </u>	<u> </u>	_	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>		ļ		<u> </u>		<u> </u>		_		<u> </u>	<u></u>			<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
										<u> </u>	<u> </u>		<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	-	<u> </u>	<u></u>	<u> </u>	<u> </u>	ļ <u></u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	_	 -
	<u> </u>										<u> </u>						<u> </u>	<u> </u>	<u>L</u>		_					<u> </u>				<u> · </u>	<u></u>	
	URI			I	1	T	T	Т	Ï	T	Ţ	Т	1	1		1		Τ	T				Τ		Γ	Γ	Т	Ι		T	Τ	Τ
				<u> </u>		<u> </u>		1	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>			<u> </u> 	<u> </u> 	<u> </u> T				<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u> 	<u> </u>	 	<u> </u>
		<u> </u>	<u> </u>	<u> </u> 		<u> </u>	<u> </u> 	+		<u> </u> T	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>		L	<u> </u> _	<u> </u>		<u> </u> 	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	\vdash	<u> </u>	 -
												L				ļ						1.			l						<u>L</u> _	_

This report is being submitted for the reporting period ending March 9, 2 0 1 6

	SPDES ID
Name of MS4/Coalition Town of Huntington	N Y R 2 0 A 2 9 7
4. Evaluating Progress Toward Measurable Goals MCM 1	
Use this page to report on your progress and project plans toward achievidentified in your Stormwater Management Program Plan (SWMPP), inc III.C.1. Submit additional pages as needed.	-
A. Briefly summarize the Measurable Goal identified in the SWMP	P in this reporting period.
 Distributed SW-related brochures and handouts at public outreach ev Distributed SW-related brochures and handouts to public spaces and Distributed SW-related brochures and handouts to businesses, school upon request. Maintain records of the number of SW-related brochures and handout 	libraries. Is and the general public
B. Briefly summarize the observations that indicated the overall efformation Goal.	ectiveness of this Measurable
Accomplished Items 1 thru 4 as listed above.	
C. How many times was this observation measured or evaluated in t	(ex.: samples/participants/eve
D. Has your MS4 made progress toward this Measurable Goal duri	ng this reporting period? ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the SW	
F. Briefly summarize the stormwater activities planned to meet the the next reporting cycle (including an implementation schedule).	goals of this MCM during
Print and distribute a minimum of five hundred (500) copies of each of brochures/handouts at the Town of Huntington's Town Hall and public the Village of Northport, Greater Huntington Yacht Club Boating Coun Huntington's Earth Day event.	libraries in Huntington and

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submittin	ig this fo	orm a	s par	t of	a joi	int r	epo	ort (on beh	alf c	of a	coal	ition				ES]	Dξ	lan	k.		
Name of MS4/Coalition	Town of F	łunting	ton				· - ···							N	Y	R R	2	0	A	2	9	7
- · · · · ·		70.004	I	 Т. Л.			_		L I !	. T.,		l	O.W	<u></u>)) a =	utioi	-	tio				
<u>Minin</u>										e In	VO	ive	пег	LL/J	aı	uci	ра	uo	11			
The information in th				g re	porte	ed (c	he	ck (one):													
On behalf of an incOn behalf of a coaHow m				ibu	ted t	to th	nis	rep	ort?													
1. What opportundevelopment, e (SWMP) Plan	evaluat	ion a	nd i	mp	rov	eme	nt	of	the S	torn	nwa	ater	Ma	naş					am	ì		
Cleanup Events															#]	Even	ts					2
O Comments on SW	MP Rec	eivec	i											#(Com	men	ts					_
• Community Hotlin	ies								Phon	e#	(6	3 1])	3	5	1	-	3	0	4	9
Phone # (6 3	1)	3 !	5 1	_	3	2 !	5	5	Phon	e#	(6	3 1])	3	5	1	-[3	2	3	4
Phone # (6 3	1)	3 !	5 1	_	3	1	1	2	Phon	e#	(])				-				
Phone # (_					Phon	e#	(])				-				
Phone # (_					Phon	e#	(])				_				
Phone # (\square)			_					Phon	e#	(])				-				
● Community Meeti	ings												4	#	Att	ende	es			1	1	6
O Plantings																Sq. l	Ft.					
Storm Drain Mark	cings														#	Drai	ns				4	3
O Stakeholder Meet	ings													ŧ.	At1	ende	ees					_
O Volunteer Monito	ring														#	Ever	nts					
Other:																						
2. Was public no Program (SW						his	an	nu	al rep	ort	and	l St	orm	wa	ter	Ma	nag	gem	ent Ye	t es	0	No
O List-Serve	•														#	In L	ist					
Newspaper Adver	rtising													ì	# Da	ıys R	un	_			1	4
O TV/Radio Notices	5													i	# Da	ıys R	un	L.				
Other: H u n	t i r	ı g	t	o r	1	Т	0	W	n	С	1	е	r l	2	1 2	3	0	f	£	i	С	е

• Web Page URL: Enter URL(s) on the following two pages.

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 6 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Van	e o	fM	(s) con't.: te provide specific address(es) where notice(s) can be accepted by the point of the																	N	Y	R	2	0	A	2	9	7				
2.	UF Ple	RL(ease	(s) (con	't.:							es)	wh	iere	e no	otic	e(s)) ca	ın l	be a	icc	esso	ed -	· no	ot h	on	ıe p	oag	e.			
г	JRL h	t	t	р	:	/	/	w	w	w		h	u	n	t	i	n	g	t	0	n	n	У		g	0	v	/	М	S	4	A
Ĺ	n	n	u		1	L		р	0	r	t	ន			ļ <u> </u>																	
Ī																																
1	JRL		ı —		_ 	1	I	1	<u> </u>	_	Γ				1		I			· · · · ·			<u> </u>		_ · <u>-··</u>	I .	_	<u>.</u>	1	Γ		Γ
						 		<u> </u>		 			 	<u> </u>	ļ					<u> </u>	<u> </u>							<u> </u>			<u></u>	<u> </u>
[<u> </u>		<u> </u>	<u> </u>	<u> </u> 	<u> </u>			1	<u> </u>		<u> </u>	<u> </u>			<u> </u>	 		<u> </u>						 		ļ [<u> </u>
	URL		L	_	l			l		<u> </u>	<u> </u>	L	<u> </u>	<u> </u>	<u> </u>		L			<u> </u>	L		<u>l</u>		l	1	L	L	·		L	J
																	·			. <u>.</u>								Ĺ				
																				ļ <u>.</u>								<u> </u>		<u></u>	_	<u> </u>
			<u> </u>				i	<u> </u>												l							ļ .			<u></u>		
	URL	<u>, </u>		_	Γ.	Τ	T	Т	Τ	Т		Ι	<u> </u>	Τ	T	Γ	1			ļ	<u> </u>		Ι		T	ſ	T	 	1	\top	ļ -	T
ļ		<u> </u>	<u> </u>	<u> </u> 		<u> </u>		<u> </u>		<u> </u> 	<u> </u>	<u> </u> 	<u> </u>	 	<u> </u>	<u> </u>	<u> </u>		<u> </u>		<u> </u>	<u> </u>		<u> </u>		<u> </u>	<u> </u>	<u> </u> 		T	<u> </u>	1
				<u> </u>		<u> </u>		<u> </u>	<u> </u>	<u> </u>				1	 		<u> </u>	<u> </u>		<u> </u>	<u> </u>	1	 	<u> </u>			<u> </u>		<u> </u>	<u> </u>	<u> </u>	
	URI		· <u>-</u>	<u> </u>			-	1				J	1			J			I					·				·				
																				<u> </u>							_			<u>_</u>	<u> </u>	+
	<u> </u>				<u> </u>			<u> </u>	<u> </u>	<u> </u>	ļ	<u> </u>		<u> </u>	<u> </u>		<u> </u>	<u></u>	1	<u> </u>	<u> </u>	<u> </u>		 			<u> </u>	<u> </u>	-	Ļ	 	Ļ
		L						_											<u>L</u>]	<u> </u>			
	URI	<u>L</u> 	Ţ -	T	T		Τ	T .	T			Γ	Τ	Τ	T			Ţ			Ţ	1				Τ				T		
					1	-	-		<u>- </u>	<u> </u>		<u> </u>			 		 	Ì		1						1	T	Ť		T	 	İ
		 			T	†	<u> </u>			T		+				Ī																Ī
	UR	 L	1		1					7						1						T			1	T-	_	η-	_		_	_
	<u>_</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	1	+	<u> </u> _	<u> </u>		<u> </u>		<u> </u>	<u> </u>	-	\perp	<u> </u>	<u> </u>	<u> </u>	+	<u> </u>	<u> </u>	1	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	1	 	+	<u> </u>
		<u> </u>		1		<u> </u>	<u> </u>	1	<u> </u>		<u> </u>		<u> </u>			+	<u> </u>	<u> </u>	<u> </u>	1	1	<u> </u>		<u> </u>	<u> </u>	+	<u> </u>	<u> </u>	1	<u>_</u>	<u> </u>	$\frac{\perp}{\top}$

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

				r																			PD		$\neg \neg$	_				_
e of N	4S4/C	oal	itio	n To	wn (of H	ıntin	gton														Ŀ	И	Y	R	2	0	A	2	9
URL	/(s) (on	't.:																											
Pleas	se pi	rov	ide	sp	eci	fic	ado	dre	ss(es)	wł	lei	re i	101	tice	es c	an	be	ac	ces	sed	- n	ot!	hoi	me	pa	ge.			
RL 	T	\neg								<u> </u>			Ţ	\neg	\top	-	- [. 1									
				_							<u> </u>	<u> </u>	+	<u> </u>	_	_		<u> </u>		1	-	_	+	_						<u> </u>
												<u> </u>	<u> </u>										_					<u></u>	_	_
																														L
IRL .																. <u>.</u>														_
\pm	+									Ī		Ī	Ť	Ī																
 	+				<u>_</u>	<u> </u>	<u> </u>	<u> </u>		$\frac{1}{1}$	<u> </u>	 	$\frac{1}{1}$	+	 	<u> </u>	 -						1					Ť –	T	Ī
L			L			l		<u> </u>	<u> </u>	1							-		<u></u>							<u>L</u> .	l	1	1	<u></u>
JRL_		[·			1			Τ_	T	Τ-	T	_		_				1	Γ—						Ι	Г	Γ-	T	Γ
	\perp				<u> </u>	<u> </u>	<u> </u>	ļ <u>.</u>	<u> </u>	1	<u> </u>	<u> </u>	_	_				 	<u> </u>		<u> </u>		_	<u></u>	<u> </u>	<u> </u>	<u> </u>	H	<u> </u>	H
									<u> </u>		<u> </u>								ļ. <u>.</u>				_		<u>_</u>	<u> </u>		Ļ	<u> </u>	L
																											<u> </u>			L
URL		ш.	1			I =		·				-1																		
		-																						-						
		<u> </u>	 	<u> </u>	<u> </u>	<u> </u>	+	1	 	 	+	t	7	╡		=			 	<u> </u>			_		T	Г		Ť		T
_		Ļ	<u> </u>	<u> </u>	<u> </u>	 	<u> </u>	+	<u> </u>	<u> </u>	 -	<u> </u>	+	닉		l	<u>I</u> I	 -	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	╁	 	ŧ	t
				<u> </u>			<u> </u>		<u>]</u>		<u> </u>									<u>L</u>	<u> </u>			L	<u> </u>		<u> </u>		1_	┸
URL		,	_	Ţ.				1	1	_	_	-T-				I	Γ.		Т	1	Ţ	1		Ι_	T -	Τ	Τ	Τ-	$\overline{}$	T
			<u> </u>				<u> </u>			1	L	1	_			<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u></u>	<u> </u>	 	<u> </u>	+-	 	+	$\frac{1}{1}$
				<u></u>													<u> </u>			<u> </u>	<u> </u>				<u> </u>	_	<u> </u>	Ļ	<u> </u>	1
URL		1		1			1			_1															_					_
				Τ	Τ			Τ				T			_			T		T										
\vdash	=	\pm	+-	+	+	\dagger	+	\dagger	+=		+	\dagger	+	_	\ <u></u>	T	†	1	 	T	- <u>-</u>	Ī	<u> </u>	T		T	T	T		T
		 -	-	<u> </u>	-	+	+	<u></u>	+	+	<u>_</u>	+		 :	<u></u>	 _ -	+	H	+ ==	+	1	+-	+	 	 	 	Ť	+=	\dagger	+
	_							Ш.				\perp			<u> </u>		1_							1.	١					
URL	··· 1"			_		_			_		7		. –		1	7	Τ.	1		-	Т-	Т	Т	Γ			7	_	\top	Т
			<u> </u>									_				<u> </u>	<u> </u>	1_	_		<u> </u>	<u> </u>		<u> </u>	+	+	<u> </u>	\dotplus	+	4
		T												I							<u></u>								\perp	
H	- +-	+	+	$^{+}$	╁	Ť	十	+	Ť	1	Ť	=†	_		Ī	T	ſ		T	Τ			T	T		T				

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank. SPDES ID NYR 0 A 2 Town of Huntington Name of MS4/Coalition 3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents? Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed. MS4/Coalition Office SWMP Plan Comments Annual Report Department f S i С Μ i r v е D e p t m e n t 0 a r t m е а r Address i s t r t 1 0 0 M a n е е City Zip 1 1 7 N Y 3 i Hun t n g t 0 n Phone 3 5 1 3 0 4 9 O Library Address O SWMP Plan O Comments O Annual Report City Zip Phone O Annual Report O SWMP Plan Comments Other Address Zip City Phone O Comments Annual Report SWMP Plan Web Page URL: S t g 0 v Μ i t g 0 n n t h u n t p W W 1 R ţ s n n u a е р 0 r Α Please provide specific address of page where report can be accessed - not home page. O Comments O eMail

This report is being submitted for the reporting period ending March 9, 2 0 1 6

	21.T	7E2 I	ע			
Name of MS4/Coalition Town of Huntington	N	Y	? :	2 0) A .	2 9 7
4.a. If this report was made available on the internet, what date was Leave blank if this report was not posted on the internet.	┯	sted				0 1 6
4.b. For how many days was/will this report be posted?	5]	<u> </u>	2]/	2	1 4
4.b. For now many days was/whi this report be posted.					<u></u>	
If submitting a report for single MS4, answer 5.a If submitting a jo	nt r	epor	t, a	nsw	er 5.b	
5.a. Was an Annual Report public meeting held in this reporting per	iod :	?		(Yes	O No
If Yes, what was the date of the meeting?	5]/[2	0 /	2	0 1 6
If No, is one planned?				(○ Yes	○ No
5.b. Was an Annual Report public meeting held for all MS4s contrib	utin	ıg to	thi	is re	port	during
this reporting period?				1	○ Yes	O No
If No, is one planned for each?					○ Yes	O No
6. Were comments received during this reporting period?					○ Yes	• No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.						

Town Clerk's Office.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coa	alition leave SPDES ID blank.
· · · · · · · · · · · · · · · · · · ·	SPDES ID
Name of MS4/Coalition Town of Huntington	N Y R 2 0 A 2 9 7
7. Evaluating Progress Toward Measurable Goals MCM 2	
Use this page to report on your progress and project plans toward aclidentified in your Stormwater Management Program Plan (SWMPP) III.C.1. Submit additional pages as needed.	
A. Briefly summarize the Measurable Goal identified in the SW	MPP in this reporting period.
1.) Comply with NYS Open Meeting laws and local public notice re Meeting Law" when implementing a public involvement/participation. 2.) Make available to the public copies of the Town's SWMP Plan at 3.) Hold a public meeting for the purpose of allowing the public to a Town's SWMP Plan and Annual MS4 Report.	on program. and Annual MS4 Report.
B. Briefly summarize the observations that indicated the overall Goal.	l effectiveness of this Measurable
The Town has met the standards set by Items 1 thru 3 (above) by so holding a public meeting allowing the public to discuss and comme and Annual MS4 Report and by providing these documents in electromeets and in hard-copy format at the Town Clerk's Office.	nt on the Town's SWMP Plan
C. How many times was this observation measured or evaluated	l in this reporting period?
D. II MCA l	(ex.: samples/participants/ever
D. Has your MS4 made progress toward this measurable goal d	uring this reporting period: ● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in the	SWMPP? • Yes O No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	the goals of this MCM during
The Town will schedule, announce and hold a public meeting for the to discuss and comment on the Town's SWMP Plan and Annual MS provide these documents in electronic format on the Town's website	S4 Report. The Town will

This report is being submitted for the reporting period ending March 9, 2 0 1 6

Name of MS4/Coalition Town of Huntington	SPDES ID N Y R 2 0 A 2 9 7
Minimum Control Measure 3. I	llicit Discharge Detection and Elimination
The information in this section is being reported (a	check one):
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to the 	nis report?
1. Enter the number and approx. percent of	of outfalls mapped: 5 3 7 # 1 0 0 %
2. How many of these outfalls have been so reporting period (outfall reconnaissance	reened for dry weather discharges during this inventory)? 5 3 7
3.a. What types of generating sites/sewershe reporting period?	ds were targeted for inspection during this
O Auto Recyclers	O Landscaping (Irrigation)
O Building Maintenance	Marinas
O Churches	Metal Plateing Operations
 Commercial Carwashes 	Outdoor Fluid Storage
O Commercial Laundry/Dry Cleaners	O Parking Lot Maintenance
O Construction Vehicle Washouts	○ Printing
O Cross-Connections	O Residential Carwashing
O Distribution Centers	○ Restaurants
O Food Processing Facilities	O Schools and Universities
O Garbage Truck Washouts	O Septic Maintenance
○ Hospitals	O Swimming Pools
O Improper RV Waste Disposal	O Vehicle Fueling
● Industrial Process Water	O Vehicle Maint./Repair Shops
• Other:	○ None
Zonedindustr	i a 1 a r e a s
Sewersheds:	
MS4 structura	1 i n s p e c t i o n s

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID	
Name of MS4/Coalition Town of Huntington	N Y R	2 0 A 2 9 7
3.b. What types of illicit discharges have	been found during this reporting period	1?
O Broken Lines From Sanitary Sewer	O Industrial Connections	
O Cross Connections	○ Inflow/Infiltration	
Failing Septic Systems	O Pump Station Failure	
O Floor Drains Connected To Storm Sewers	O Sanitary Sewer Overflows	
Illegal Dumping	O Straight Pipe Sewer Discharges	
Other: Pool Pumpouts	O None	during this
4. How many illicit discharges/potentia reporting period?	I illegal connections have been detected	during this
5. How many illicit discharges have been	en confirmed during this reporting perio	od? 3 0
6. How many illicit discharges/illegal coperiod?7. Has the storm sewershed mapping be If No, approximately what percent was	een completed in this reporting period?	this reporting 3 0 Yes • No 8 8 8
8. Is the above information available in Is this information available on the VIII Yes, provide URL(s): Please provide specific address of page URL		● Yes ○ No ○ Yes ● No page.
URL		

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 1 \end{vmatrix}$

JRL	F	Γ''Τ	1		_		_	1			<u>.</u>		T	1	I					ι		Γ					Γ		_
	<u> </u>					-	<u> </u>	ļ				<u> </u>	<u> </u>				<u></u>	<u> </u>							<u>_</u>	<u></u>			L
									<u> </u>	ļ																			
 ЛКL							•													•			•						
	İ							<u> </u>				<u> </u>																	Ī
+	+										<u> </u>	<u> </u>	<u> </u>			<u> </u>			<u> </u>				<u> </u>	<u> </u>					-
	l						L.,	l	l		L_	<u> </u>	L	L		L			L_				l	L	l .	<u>l</u> .	l		L
JRL	Т					<u> </u>	Τ			ļ	Ţ	T	Γ	Γ-	T .	Γ		Ţ	Ţ			Γ	T		T				Г
	+-	<u> </u>					<u> </u>	<u></u>	<u> </u>	<u>L.</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u></u>			<u> </u>	<u>I </u>	<u> </u>	<u> </u> 	<u> </u>	<u> </u>	l T	<u> </u> 	<u> </u>		<u></u>
	<u> </u>						<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u> </u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>		<u>L</u> .	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u>_</u>
							<u> </u>							<u></u>	ļ			<u>. </u>					<u> </u>	<u> </u>	l				_
JRL	т	T - 1			Γ	r -		ſ	Ι.		Γ.	Т	т	ľ	l	_	1	1	1	Τ	T	Ι		1	1	1.	<u> </u>	Γ_	
	<u>. </u>				ļ	<u> </u>	ļ	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u></u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>				<u> </u>					<u> </u>	<u> </u>	<u> </u>	
											<u> </u>							<u> </u>					<u> </u>				<u> </u>		<u> </u>
																						<u> </u>			<u></u>				
JRL		,			ı 				,					,			1		ı		1						_	T	_
													<u></u>													<u></u>			L
														<u></u>								<u> </u>							
Had	s an	ını	ne.	lar	sz b		n 9/	dor	tor	l fo	i e	ı aci	h fr	- d	itio	nal	M	S4	an	d/o	r h	ave	· TT	ותנ	E. n	rnc	·edi	ure	S.
app	rov	ed f	or	all	no	n-t	rac	litie	ona	ıl N	AS.	4s (on:	tril	out	ing	to	thi	s r	epo	rt?)			- r		Y		(
app	rov	ed f	or	all	no	n-t	rac	liti	ona	al N	AS.	4s (con	tril	buti	ing	to	thi	s r	epo	rt?	,				•) Y	es	(

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid$

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		DES	ID						
Name of MS4/Coalition Town of Huntington	N	Y	R	2	0	A	2	9	7

12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

- 1.) Develop, implement and enforce a program to detect and eliminate illicit discharges to the Town's MS4 system and the environment.
- 2.) Inform the public of the health and environmental hazards associated with illicit discharges.
- 3.) Select and implement appropriate Best Management Practices (BMPs) to reduce Pollutants Of Concern (POCs) in stormwater flows.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has met the requirements of Items 1 thru 3 (above) by developing, implementing and enforcing a program to detect and eliminate illicit discharges to the Town's MS4 system and the environment, distributing brochures/handouts to the public describing the health and environmental hazards associated with illicit discharges and selecting and implementing appropriate Best Management Practices (BMPs) to reduce Pollutants Of Concern (POCs) in stormwater flows.

C. How many times was this observation measured or ev	aluated in this reporting period?
• • • • • • • • • • • • • • • • • • •	
	(ex.: samples/participants/events
D. Has your MS4 made progress toward this measurable	goal during this reporting period?

- O No Yes E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

O No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to develop, implement and enforce a program to detect and eliminate illicit discharges to the Town's MS4 system and the environment, inform the public regarding the health and environmental hazards associated with illicit discharges and select and implement appropriate Best Management Practices (BMPs) to reduce Pollutants Of Concern (POCs) in stormwater flows.

SWPPP process?

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID
Name of MS4/Coalition Town of Huntington	N Y R 2 0 A 2 9 7
Minimum Control Measures 4 a	and <u>5.</u>
Construction Site and Post-Constructi	ion Control
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	
1a. Has each MS4 contributing to this report adopted a law, ordin mechanism that provides equivalent protection to the NYS SP	PDES General Permit for
Stormwater Discharges from Construction Activities?	● Yes ○ No
1b. Has each Town, City and/or Village contributing to this report equivalent to a NYSDEC Sample Local Law for Stormwater I Sediment Control through either an attorney certification or Analysis Workbook?	Management and Erosion and
If Yes, Towns, Cities and Villages provide date of equivalent NY	//S Sample Local Law. ○ 09/2004 ● 03/2006 ○ NT
2. Does your MS4/Coalition have a SWPPP review procedure in	n place? • Yes O No
3. How many Construction Stormwater Pollution Prevention Pleareviewed in this reporting period?	lans (SWPPPs) have been
4. Does your MS4/Coalition have a mechanism for receipt and comments related to construction SWPPPs?	consideration of public ● Yes ○ No ○ NT
If Yes, how many public comments were received during this rep	porting period?

5. Does your MS4/Coalition provide education and training for contractors about the local

○ Yes • No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

Notices of Violation	#		O No Authority
• Stop Work Orders	#	1	O No Authority
• Criminal Actions	#		O No Authority
O Termination of Contracts	#		No Authority
O Administrative Fines	#		No Authority
Civil Penalties	#		O No Authority
O Administrative Orders	#		No Authority
O Enforcement Actions or Sanctions	#		
O Other	#		No Authority

This report is being submitted for the reporting period ending March 9, 2 0 1 6

Name of MS4/Coalition Town of Huntington	SPDES ID N Y R 2 0 A 2 9 7
Minimum Control Measure 4. Construction Site	Stormwater Runoff Control
The information in this section is being reported (check one):	
● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to this report?	
1. How many construction projects have been authorized for during this reporting period?	disturbances of one acre or more
2. How many construction projects disturbing at least one ac during this reporting period?	re were active in your jurisdiction
3. What percent of active construction sites were inspected d	uring this reporting period? ONT
4. What percent of active construction sites were inspected m	ore than once? ONT
5. Do all inspectors working on behalf of the MS4s contribut Construction Stormwater Inspection Manual?	ing to this report use the NYS ○ Yes • No ○ NT
6. Does your MS4/Coalition provide public access to Stormw (SWPPPs) of construction projects that are subject to MS4	
If your MS4 is Non-Traditional, are SWPPPs of construct public review?	
If Yes, use the following page to identify location(s) where SV	WPPPs can be accessed.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Huntington	N Y R 2 0 A 2 9 7							
6. con't.: Submit additional pages as needed.								
MS4/Coalition Office								
Department								
Engineering Services								
Address 100 Main Street								
City	Zip							
Huntington NY	1 1 7 4 3 -							
Phone								
(6 3 1) 3 5 1 - 3 1 5 1								
○ Library								
Address								
City	Zip							
Phone								
(
O Other								
Address								
City	Zip							
Phone								
rione -								
CANADA AND AND AND AND AND AND AND AND AN	1							
O Web Page URL(s): Please provide specific address where SWPPPs c	an be accessed - not nome page.							
URL								
URL								

This report is being submitted for the reporting period ending March 9, $\begin{vmatrix} 2 & 0 \end{vmatrix} 1 \begin{vmatrix} 6 & 0 \end{vmatrix}$

n suomittin	ig this form as part of a jo	introport on bonair of		70 ID OIGIR.
	Town of Huntington		SPDES ID N Y R	2 0 A 2 9 7
Name of MS4/Coalition	Town of Transmigron		NIN	
. Evaluating Pro	gress Toward Measura	able Goals MCM 4		
dentified in your St	ort on your progress and ormwater Management tional pages as needed.			
A. Briefly summaı	rize the Measurable Go	oal identified in the	SWMPP in this rep	orting period.
(SWPPPs) for cons 2.) Ensure that Tow	n staff and contractor f	irms receive applicat	ole training/informati	
	ment control and stormy ion/enforcement for SW			
erosion and sedime	ng period the Town has ent control and stormward performed and document.	ter pollution training/	information to emple	oyees and
C. How many time	es was this observation	n measured or evalu		1
D. Has your MS4	made progress toward	this measurable go		: samples/participants/eting period? • Yes O No
E. Is your MS4 or	schedule to meet the	deadline set forth in	the SWMPP?	• Yes O No
F. Briefly summa the next report	rize the stormwater ac ing cycle (including an	tivities planned to n implementation sc	neet the goals of thi hedule).	s MCM during
stormwater pollution	ntinue to review all SWI on training/information ons of construction activ	to employees and cor	ntractor firms and pe	nent control and rform and

Other:

LWRA

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Maille of Mi34/Coalthorit	Town of Huntington	uro 5 Post	Construction] <u> </u>	A 2 9 7
The information in this On behalf of an indi On behalf of a coali How ma	s section is being vidual MS4 tion any MS4s contri	reported (checonstruction	ek one): report?	n Stormwater Mana	
MS4/Coalition in	ventoried, inspe	cted and main	tained in this re #	eporting period? # Times	
		Inventoried	Inspections	Maintained	
● Alternative Practice	es	5	5	5	
O Filter Systems					
Infiltration Basins		4 8 0	4 8 0	4 8 0	
Open Channels					
○ Ponds					
○ Wetlands					
Other		1	1		
BMPs, inspection	ons and mainta	ınance?			● Yes ○ No
3. What types of 1 Development/B	ion-structural etter Site Desig	practices hav gn/Green Infi	e been used to rastructure pri	implement Low Impac nciples?	:t
O Building Codes	O Municipal Co	omprehensive I	Plans		
Overlay Districts	Open Space	Preservation Pr	ogram		
○ Zoning	• Local Law or	r Ordinance			
○ None	● Land Use Re	egulation/Zonin	g		
O Watershed Plans	• Other Comp	rehensive Plan			

o c i a t e d

LWRP

This report is being submitted for the reporting period ending March 9, 2 0 1 6

	SPDES ID
Name of MS4/Coalition Town of Huntington	N Y R 2 0 A 2 9 7
4a. Are the MS4s contributing to this report involved in a region	nal/watershed wide planning effort? ● Yes ○ No
4b. Does the MS4 have a banking and credit system for stormw	
4c. Do the SWMP Plans for each MS4 contributing to this repo and approval of banking and credit of alternative siting of a	rt include a protocol for evaluation
4d. How many stormwater management practices have been im reporting period?	plemented as part of this system in this
5. What percent of municipal officials/MS4 staff responsible for training on Low Impace Development (LID), Better Site Des Infrastructure principles in this reporting period?	

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

			SPI)ES	ID.						
Name of MS4/Coalition	Town of Huntington		N	Y	R	2	0	A	2	9	7
		,									

6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

- 1.) Implement and enforce a program that provides equivalent protection to the NYS SPDES general Permit for Stormwater Discharges from Construction Activities.
- 2.) Implement and enforce a program providing inspection(s) of development/redevelopment sites.
- 3.) Select appropriate post-construction stormwater BMPs to reduce POCs in stormwater flows.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has met the requirements of Items 1 thru 3 (above) by implementing and enforcing a program that provides equivalent protection to the NYS SPDES general Permit for Stormwater Discharges from Construction Activities, implementing and enforcing a program providing inspection(s) of development/redevelopment sites and selecting appropriate post-construction stormwater BMPs to reduce POCs in stormwater flows where needed.

C.	2. How many times was this observation measured or evaluated in this reporting period?	
		.]
	(ex.: samples/participan	nts/events
т.	The property of the second this was a week and during this was a wind?	

- D. Has your MS4 made progress toward this measurable goal during this reporting period?
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

● Yes ○ No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to implement and enforce a program that provides equivalent protection to the NYS SPDES general Permit for Stormwater Discharges from Construction Activities, implement and enforce a program providing inspection(s) of development/redevelopment sites and select appropriate post-construction stormwater BMPs to reduce POCs in stormwater flows where needed.

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 6$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		<u>s</u>	PDI	<u>ES.</u>	Ш							
Name of MS4/Coalition	Town of Huntington	[N	Y 1	R	2	0	A	2	9	7	

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 	

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

Self-Assessment
Operation/Activity/Facility
performed within the past 3

		periora	TOCK TITURANA	
Operation/Activity/Facility	<u>Addressed i</u>	n SWMP?	<u>vears?</u>	•
Street Maintenance	• Yes	O No	. • Yes	\bigcirc No
Bridge Maintenance	● Yes	○ No	• Yes	O No
Winter Road Maintenance		○ No	• Yes	O No
Salt Storage	• Yes	○ No	• Yes	○ No
Solid Waste Management		O No	• Yes	\bigcirc No
New Municipal Construction and Land Disturbar	~	• No	O Yes	O No
Right of Way Maintenance	Yes	O No	• Yes	O No
Marine Operations	• Yes	○ No	• Yes	\circ No
Hydrologic Habitat Modification		• No	O Yes	O No
Parks and Open Space		○ No	• Yes	○ No
Municipal Building	A	○ No	• Yes	O No
Stormwater System Maintenance		○ No	• Yes	O No
Vehicle and Fleet Maintenance	A	○ No	• Yes	O No
Other	■ X7.00	○ No	● Yes	O No

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID	
Name of MS4/Coalition Town of Huntington	N Y R	2 0 A 2 9 7
2. Provide the following information about municipal operat	tions good houseke	eping programs:
Parking Lots Swept (Number of acres X Number of times swept	ot) # Acres	6 0 0
• Streets Swept (Number of miles X Number of times swept)	# Mile	8 0 0
© Catch Basins Inspected and Cleaned Where Necessary	#	1 2 8 8
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	7	‡ 5
O Phosphorus Applied In Chemical Fertilizer	# Lbs	
Nitrogen Applied In Chemical Fertilizer	# Lbs	. 2 0 0 0
O Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X N times applied to the nearest tenth.)	# Acres Number of	
3. How many stormwater management trainings have been	provided to munici	pal employees
during this reporting period?		
4. What was the date of the last training?	1 1 / 2	5 / 2 0 1 5
5. How many municipal employees have been trained in this	reporting period?	1 3 1
6. What percent of municipal employees in relevant position stormwater management training?	s and departments	receive

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPI	ノヒシ	ш						
Name of MS4/Coalition Town of Huntington	N	Y	R	2	0	A	2	9	7

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

- 1.) Implement a Pollution Prevention/Good Housekeeping program for municipal facilities.
- 2.) Incorporate when/where feasible cost-effective stormwater run-off control/reduction techniques and green infrastructure development practices at municipal facilities.
- 3.) Select and implement appropriate Pollution Prevention/Good Housekeeping BMPs to reduce the level of POCs in stormwater flows.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has met the requirements of Items 1 thru 3 (above) by implementing a Pollution Prevention/Good Housekeeping program for municipal facilities, incorporating when/where feasible cost-effective stormwater run-off control/reduction techniques and green infrastructure development practices at municipal facilities and selecting and implementing appropriate Pollution Prevention/Good Housekeeping BMPs to reduce the level of POCs in stormwater flows.

	· · · · · · · · · · · · · · · · · · ·
C. How many times was this observation measured or evalua	ted in this reporting period?
·	1
	(ex.: samples/participants/events)
D. Has your MS4 made progress toward this measurable goa	l during this reporting period?
-	● Yes ○ No
E. Is your MS4 on schedule to meet the deadline set forth in t	the SWMPP?
	● Yes ○ No
F. Briefly summarize the stormwater activities planned to me	eet the goals of this MCM during

The Town will continue to implement a Pollution Prevention/Good Housekeeping program for municipal facilities, incorporate when/where feasible cost-effective stormwater run-off control/reduction techniques and green infrastructure development practices at municipal facilities and selecting and implement appropriate Pollution Prevention/Good Housekeeping BMPs to reduce the level of POCs in stormwater flows.

the next reporting cycle (including an implementation schedule).

This report is being submitted for the reporting period ending March 9, 2016 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID									
Name of MS4/Coalition Town of Huntington		N	Y	R	2	0	A	2	9	7

n behalf of an individual M n behalf of a coalition			
How many MS ²	s contributed to this re	port?	
4s must answer the que	estions or check NA as	s indicated in the table	below.
MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	-	<u>-</u>
aditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
aditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
on-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-		•
aditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
on-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed	<u>-</u>	-	<u> </u>
aditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
aditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay			Pathogens
aditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	
aditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens Pathogens
on-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	r autogens
Peconic Estuary	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
raditional Land Use	1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9,10,11,12	2,3,5,6,86	Pathogens and Nitrogen
raditional Non-Land Use	1,4,7a-d,8a,9,10,11,12 1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
on-Traditional	1,4,74-4,04,7	2,0,7,00,10,11,12	-
Oscawana Lake Watershed raditional Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
raditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
on-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
LI 27 Embayments	×97105100 00100012	-	<u> </u>
raditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
raditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
on-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

		SPDES ID		
Nan	ne of MS4/Coalition Town of Huntington	N Y R 2	0 A 2	9 7
	Does your MS4/Coalition have a Stormwater Conveyance Systand Maintenance Plan Program?	tem (infrastructu ● Yes	re) Inspe	ection O N/A
	Estimate the percentage of on-site wastewater treatment system and maintained or rehabilitated as necessary in this reporting		inspect	ed 5 %
	Has your MS4/Coalition developed a program that provides p NYSDEC SPDES General Permit for Stormwater Discharges (GP-0-08-001) to reduce pollutants in stormwater runoff from disturb five thousand square feet or more?	from Construction	on Activi	ties
6.	Has your MS4/Coalition developed a program to address post runoff from new development and redevelopment projects that equal to one acre that provides equivalent protection to the NY Permit for Stormwater Discharges from Construction Activitithe New York State Stormwater Design Manual Enhanced Ph Standards?	at disturb greater YS DEC SPDES (es (GP-0-08-001)	than or General , includi	
7a.	Does your MS4/Coalition have a retrofitting program to reduce phosphorus/nitrogen/pathogen loading?	ce erosion or • Yes	O No	O N/A
7b	.How many projects have been sited in this reporting period?			1
	. What percent of the projects included in 7b have been comple		ting peri	od?
7d	.What percent of projects planned in previous years have been		Drainata	0 %
8a	.Has your MS4/Coalition developed and implemented a turf m procedures policy that addresses proper fertilizer application lands?	anagement pract	wned	
8 b	o. Has your MS4/Coalition developed and implemented a turf m procedures policy that addresses proper disposal of grass clip municipally owned lands?	nanagement prac ppings and leaves • Yes	tices and from O No	O N/A

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

•		DES	ш				
Name of MS4/Coalition Town of Huntington	N	Y	R	2	0 A	2 9	7
9. Has your MS4/Coalition developed and implemented a prog	gram of n	ative T	pla Ye	ant s	ing? ○ No	0	N/A
10. Has your MS4/Coalition enacted a local law prohibiting pet prohibiting goose feeding?	waste on	mu C	nici Ye	pal s	prop O No	ertie O	s and N/A
11. Does your MS4/Coalition have a pet waste bag program?		C	Ye	es	• No	, С	N/A
12. Does your MS4/Coalition have a program to manage goose populations?			Υŧ	es	0 No	, C	N/A